



JONATHAN E. FIELDING, M.D., M.P.H.
Director and Health Officer

JONATHAN E. FREEDMAN
Chief Deputy Director

313 North Figueroa Street, Room 806
Los Angeles, California 90012
TEL (213) 240-8117 • FAX (213) 975-1273

www.publichealth.lacounty.gov



BOARD OF SUPERVISORS

Gloria Molina
First District

Mark Ridley-Thomas
Second District

Zev Yaroslavsky
Third District

Don Knabe
Fourth District

Michael D. Antonovich
Fifth District

April 25, 2011

TO: Each Health Deputy

FROM: Jonathan E. Fielding, M.D., M.P.H. *JEF*
Director and Health Officer

**SUBJECT: NOTIFICATION OF RESPONSE TO CALIFORNIA DEPARTMENT OF
PUBLIC HEALTH HOME VISITING PROGRAM REQUEST FOR
SUPPLEMENTAL INFORMATION TO EXPAND HOME VISITATION**

This is to inform you that the Department of Public Health (DPH) has submitted a plan to the California Department of Public Health (CDPH) to expand home visitation services in targeted communities in Los Angeles County in response to the California Home Visiting Program Request for Supplemental Information (HPV-RSI) that was sent to each of the 58 counties in the State.

Background

The federal Patient Protection and Affordable Care Act of 2010, signed into law by the President on March 23, 2010, includes a provision authorizing the creation of the Affordable Care Act (ACA) Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program. The Act seeks to improve health and development outcomes for at-risk children through evidence-based home visiting programs. The goals of funded home visitation programs are to assure effective coordination and delivery of critical health, developmental, and early learning services; prevent child abuse and neglect; and provide other family support services to vulnerable children and families.

The federal Health Resources and Services Administration (HRSA) requires states to follow a three-step application process to receive MIECHV funding. The California Department of Public Health already completed the first two steps by submitting an application for funding and a statewide needs assessment. The State is in the process of completing the final step of submitting an updated State plan. The HPV-RSI was sent by CDPH to each of the 58 counties to solicit information about county-identified high-risk communities and proposed county home visitation implementation plans. The information submitted by each county in response to the HPV-RSI will be used by CDPH to prioritize which counties will receive MIECHV funds to implement home visitation programs in fiscal year 2011-12.

High-risk Communities

DPH identified three high-risk Los Angeles County communities as required by the HPV-RSI. These communities are populations of pregnant and parenting young women enrolled in Los Angeles Unified School District (LAUSD) schools and programs and high-risk families living in the Antelope Valley and Service Planning Areas 2, 3, and 7. These communities were selected because they had a high percentage of births to high-risk families that were not currently being adequately served by existing home visitation programs.

Home Visitation Models

Nurse Family Partnership

CDPH selected the Nurse Family Partnership (NFP) and the Healthy Families America (HFA) home visitation models for implementation among the evidence-based programs allowed under MIECHV. NFP uses public health nurses as home visitors to first time high-risk mothers. Home visits are initiated before the mother's 28th week of pregnancy and continue until the child reaches their second birthday. Home visits follow tested program protocols that focus on six domains of functioning: personal health, environmental health, maternal role development, maternal life-course development, building support networks, and understanding how to access health and social service programs in the community. DPH currently operates a countywide NFP program with a caseload capacity of 831 clients. The NFP program is funded by net County cost, federal Title XIX Targeted Case Management, and the Mental Health Services Act.

Healthy Families America

Healthy Families America sends Family Support Workers (FSWs) to visit the homes of overburdened families with children between the ages of 0 and 5 who are at-risk for child abuse and neglect and other adverse childhood experiences. Home visits are made to families that have histories of trauma and intimate partner violence and that have family members who suffer from mental illness and substance abuse. FSWs visit families on a weekly basis with the goal of improving participants' parenting skills and providing medical, social service, and educational referrals. Antelope Valley Hospital in SPA 1 operates a program that uses the Healthy Families America model called Healthy Homes. The Health Homes program has a caseload capacity of 135 clients.

Next Steps

If MIECHV funds are awarded to the County of Los Angeles, it is anticipated that the DPH NFP program will expand its current caseload capacity from 831 clients to 1,031 clients by serving an additional 100 clients in SPAs 2, 3, and 7, and subcontracting with LAUSD to provide services to 100 clients. DPH also anticipates contracting with Antelope Valley Hospital to expand Healthy Families America services in SPA 1 from a caseload of 135 clients to 235 clients.

Each Health Deputy
April 25, 2011
Page 2

If you have any questions or require additional information, please let me know.

JEF: CAH:

c: Sheila Shima
Richard Mason
Jonathan Freedman
Cynthia A. Harding